BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

pplication or Docket Number

4361-000002

| CLAIMS AS FILED - PART I (Column 1) | | | | | | mn 2) | | SMALL ENTITY TYPE | | | OTHER THAN R SMALL ENTITY | |
|--|--|---|-----------------------|-------------------------------|------------------------------|------------------|-----------------|-------------------|------------------------|----------------------------|---------------------------|------------------------|
| TOTAL CLAIMS | | | // | | | | Γ | RATE | FEE | | RATE | FEE |
| FOR | | | NUMBER FILED | | NUMB | NUMBER EXTRA | | ASIC FEE | 355.00 | OR | BASIC FEE | 710.00 |
| TOTAL CHARGEABLE CLAIMS | | | // minus 20= | | . 0 | | | X\$ 9= | | OR | X\$18= | |
| INDEPENDENT CLAIMS | | | 4 minus 3 = | | • / | | | X40= | 40 | OR | X80= | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | · | | | +135= | 11- | OR | +270= | |
| * If the difference in column 1 is less than zero, enter | | | | | r "0" in c | olumn 2 | L | TOTAL | 395 | OR | TOTAL | |
| 12 | 112/5 CI | LAIMS AS A (Column 1) | (Column 2) (Column 3) | | | | SMALL ENTITY OF | | | OTHER THAN SMALL ENTITY | | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| NDN | Total | . 4 | Minus | 3 | 10 | = / | L | X\$ 9= | | OR | X\$18= | |
| AME | Independent | • 2 | Minus | DENIDEND | 7 | =/ | | X40= | | OR | X80= | |
| | FIRST PRESE | NTATION OF MI | JLIIPLE DEI | PENDEN | CLAIM | لللل | | +135= | | OR | +270= | |
| | | | | | | | L | TOTAL DIT. FEE | | OR | TOTAL ADDIT, FEE | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | NUM PREVI | HEST MBER OUSLY FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| NO N | Total | • | Minus | •• | | = | | X\$ 9= | | OR | X\$18= | |
| AME | Independent | • | Minus | ••• | T (2) A (3) 4 | = | | X40= | | OR | X80= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | +135= | | OR | +270= | |
| | | 2 | | | | | AD | TOTAL DIT. FEE | | OR | YOTAL ADDIT. FEE | |
| | | | | | | | | | | | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | NUM PREVI | HEST MBER OUSLY FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | • | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | 7 |
| | Independent | • | Minus | ••• | | = | | X40= | | OR | X80= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | ' - | +135= | | OR | +270= | |
| " If the entry in column 1 is less than the entry in column 2, write "0" in column 3. " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FEF | | | | | | | | | | | TOTAL ADDIT. FEE | |
| | | mber Previously P | | | | | | | ropriate bo | Kinco | | |